

Application Data Sheet

Application Information

Application number:: Unknown
Filing Date:: January 10, 2006
Application Type:: Regular
Title:: SYSTEM OF INFUSION OF
PHARMACOLOGICAL
SOLUTIONS
Attorney Docket Number:: 4017-41
Total Drawing Sheets:: 5
Small Entity?:: Yes

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Italy
Status:: Full Capacity
Given Name:: Marco
Family Name:: PIROVANO
City of Residence:: Milano
Country of Residence:: Italy
Street of mailing address:: Via Vittadini, 9
City of mailing address:: Milano
Country of mailing address:: Italy
Postal or Zip Code of mailing address:: 20146
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Italy
Status:: Full Capacity
Given Name:: Stefania
Family Name:: IMPROTA
City of Residence:: Roma
Country of Residence:: Italy

Street of mailing address:: Via Posidippo, 8
City of mailing address:: Roma
Country of mailing address:: Italy
Postal or Zip Code of mailing address:: 00125

Correspondence Information

Correspondence Customer Number:: 23117

Representative Information

Representative Customer Number:: 23117

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		DAY/MONTH/YEAR	
IT	MO2003A000201	11 July 2003	Yes
	PCT/IB2004/002245	9 July 2004	Yes

Assignee Information

Assignee Name:: H.S. Hospital Service S.p.A.
Street of mailing address:: Via delle Valli
City of mailing address:: Aprilia (LT)
Country of mailing address:: Italy
Postal or Zip Code of mailing Address:: 04011